



Housing Opportunities for Persons With AIDS (HOPWA) Program Guidelines/Application

**July 1, 2010 – June 30, 2011 Program Year
Virginia Non-Eligible Metropolitan Areas**

Deadline 5:00 PM, Friday, April 9, 2010

The Department of Housing and Community Development (DHCD) seeks proposals from eligible service providers (project sponsors) to provide HOPWA assistance to clients within non-eligible metropolitan statistical areas within the State of Virginia.

HOPWA Program

The Housing Opportunities for Persons With AIDS (HOPWA) program was authorized by the National Affordable Housing Act of 1990 and revised under the Housing and Community Development Act of 1992, to provide states and localities with the resources and incentives to devise and implement long-term comprehensive strategies for meeting the housing needs of low-income persons with Acquired Immunodeficiency Syndrome (AIDS) and related diseases, and their families. Activities of primary importance are providing housing assistance and services that assist this population to maintain housing stability where they can maintain complex medication regimens and address HIV/AIDS related problems.

Funds are appropriated annually by Congress to the U.S. Department of Housing and Urban Development (HUD) for administration of this program. HOPWA funds are then awarded by formula to eligible states and Eligible Metropolitan Statistical Areas (EMSAs) that meet the minimum number of cumulative AIDS cases. States and metropolitan areas coordinate use of HOPWA funds with their respective Consolidated Plans, a collaborative process whereby the state or metropolitan area establishes a unified vision for community development actions.

As an eligible state, the Commonwealth of Virginia receives a HOPWA formula grant, administered by the Department of Housing and Community Development (DHCD). DHCD grants these HOPWA funds to eligible project sponsors (that operate outside the state's EMSAs) based on a competitive application process.

Funding Levels

DHCD anticipates having approximately \$650,000 available for funding of proposals selected through this competitive application process. DHCD will not make grants less than \$15,000 (minimum) and does not anticipate making grants in excess of \$200,000.

DHCD will select from among the applicants' proposals those that best meet the prioritized needs based on the 2008-2012 Consolidated Plan. Please see proposal evaluation criteria for specifics.

Eligible Service Areas

Funds received through these awards will only support clients and programs within Virginia's non-eligible metropolitan statistical areas. HOPWA eligible metropolitan areas receive their HOPWA allocations directly from HUD and have specific guidelines and separate processes not included within this application process or program.

Counties of:			Independent Cities of:
Accomack	Franklin	Page	Bedford City
Albemarle	Frederick	Patrick	Bristol
Alleghany	Giles	Pittsylvania	Buena Vista
Amherst	Grayson	Prince Edward	Charlottesville
Appomattox	Greene	Pulaski	Covington
Augusta	Greensville	Rappahannock	Danville
Bath	Halifax	Richmond	Emporia
Bedford	Henry	Roanoke	Franklin City
Bland	Highland	Rockbridge	Galax
Botetourt	King George	Rockingham	Harrisonburg
Brunswick	Lancaster	Russell	Lexington
Buchanan	Lee	Scott	Lynchburg
Buckingham	Lunenburg	Shenandoah	Martinsville
Campbell	Madison	Smyth	Norton
Carroll	Mecklenburg	Southampton	Radford
Charlotte	Middlesex	Tazewell	Roanoke City
Craig	Montgomery	Washington	Salem
Culpeper	Nelson	Westmoreland	Staunton
Dickenson	Northampton	Wise	Waynesboro
Essex	Northumberland	Wythe	Winchester
Floyd	Nottoway		
Fluvanna	Orange		

Applicant (Project Sponsor) Eligibility

Applicants must be a nonprofit (including faith-based organizations) or governmental housing agency currently receiving HOPWA funding through DHCD and/or Ryan White funding. Applicants must be targeting services to individuals living within the Virginia's non-eligible metropolitan statistical areas.

Applicants must demonstrate the ability to manage the HOPWA program and all applicable state and federal policies and procedures including compliance with federal and state non-discrimination laws.

Applicants must have established internal control and fiscal accounting procedures.

Applicants with outstanding audit findings, IRS findings, DHCD monitoring findings or other compliance issues are not eligible for a HOPWA grant. Please note that DHCD will work with all interested parties toward the resolution of unresolved matters, where appropriate.

Applicants should demonstrate the ability to coordinate, where appropriate, client services with other service providers and leverage where possible other resources toward meeting overall client needs and program goals.

Applicants must demonstrate the ability to meet all reporting and record keeping requirements including maintaining the confidentiality of client records.

Program Participant Eligibility

There are two basic elements of HOPWA eligibility:

- Household has at least one person who has Acquired Immunodeficiency Syndrome (AIDS) or related diseases (Human Immunodeficiency Virus, that is, HIV infection). This includes households where the only eligible person is a minor. Medical verification of status is required.
- Total household income is less than 80 percent of the Area Median Income (AMI), as defined by HUD.

HUD sets Median Income levels for communities across the country; these numbers vary significantly. This data can be found at: <http://www.huduser.org/datasets/il.html>

All participant files must contain documentation that verifies the participants' eligibility to receive HOPWA assistance. Low-income people living with Acquired Immunodeficiency Syndrome (AIDS) or Human Immunodeficiency Virus (HIV) diagnosis and their families are eligible to receive HOPWA assistance. Acceptable medical documentation of HIV status includes:

- A statement of HIV verification signed by a physician, certified health care worker, or HIV testing site representative;
- Social Security Administration records indicating the nature of a disability determination;
- Other relevant federal program records verifying HIV status.

It is important to note that sponsors must have adequate signed releases of information from HOPWA participants that allow them to obtain and store HIV status documentation. As part of a private medical record, such information is highly confidential and protected by state laws that govern HIV status information (see Confidentiality Standards, p. 13 of this manual).

“Low income” means total household income of less than 80 percent of the median income for the area (Area Median Income or AMI), as defined by HUD. HUD AMIs are calculated annually for individual localities and organized by number of persons in the

household.¹ In calculating eligibility, the entire household income must be taken into account, not just the income of the HOPWA eligible person. The number of persons living in the household applying for assistance must also be verified. A statement from the participant regarding household composition is acceptable documentation.

The project sponsor should have income verification for all adult members of a household (including any minor's income). If an adult member of a household has no verifiable income, the project sponsor must have the person sign and date a statement stating that he/she has no income.

Income documentation should reflect current income. Typically income statements should be less than 90 days old, based on the date of eligibility determination. Eligibility must be verified annually, taking into account possible changes in household income.

To receive HOPWA housing assistance and supportive services, at least one family member must have HIV/AIDS and the household must income-qualify. The HOPWA-eligible person in any household can be a minor.² However, an adult with custodial authority must accompany the eligible minor. In such a case, the "head of the household" is the custodial adult.

Eligible Activities

The 2010-11 HOPWA funds will be focused on direct housing assistance to those most in need and supportive services for the HOPWA eligible individuals.

Applicants are strongly encouraged to partner with other service providers (both public and private) to coordinate client services and fully leverage the available resources in the particular service area.

At least 65 percent of the total HOPWA grant to any one project sponsor must be expended on direct housing assistance. No more than 35 percent may be spent on supportive services.

Eligible housing activities (direct housing assistance) for this HOPWA program can be met through the provision of:

- Tenant based rental assistance (TBRA)
- Short term rental, mortgage, and utility assistance (STRMU)

¹ Area Median Income charts can be found at <http://www.huduser.org/datasets/il.html>. For detailed information and online training material regarding how to calculate annual income, visit HUD's website: <http://www.hud.gov/offices/cpd/affordablehousing/training/web/calculator/calculator.cfm>

² See CPD Notice 06-07, FAQ question "m":
<http://www.hud.gov/offices/cpd/aidshousing/lawsregs/notices.cfm>

Applicants may request up to seven percent of the total award for administrative costs. See program guidelines for qualified administrative costs.

Summary of Eligible Activities		
Type Activity	Priority	Budget Parameters
TBRA	HIGH	Total housing assistance 65 percent* or greater (may be combined with STRMU so that total housing assistance is 65 percent or greater)
STRMU	HIGH	Total housing assistance 65 percent* or greater (may be combined with TBRA so that total housing assistance is 65 percent or greater)
Supportive Services <ul style="list-style-type: none"> Including permanent housing placement 	MEDIUM	35 percent* or less
Administrative Costs	N/A	Not more than 7 percent*

- * It is important to note that housing assistance must account for at least 65 percent of the total HOPWA budget and administrative costs and supportive services together may not exceed 35 percent of the budget with caps of seven percent and 35 percent respectively. See table below.

Examples of HOPWA Budget Allocations		
Housing Assistance	Supportive Services	Administrative Costs
65 percent	35 percent	0
70 percent	23 percent	7 percent
75 percent	20 percent	5 percent

Tenant-based rental assistance (TBRA) is a rental subsidy used to help participants obtain permanent housing in the private rental housing market that meets housing quality standards and is rent reasonable. Eligible costs include rent (not mortgage payments) and utility costs. Working much like the Section 8 Housing Choice Voucher Program, HOPWA tenant-based assistance pays the difference between the Fair Market Rent or “reasonable rent” and the tenant’s portion of the rent. With TBRA, the HOPWA project sponsor makes rental payments directly to property owners. The HOPWA subsidy covers a portion of the full rent; the tenant also pays a portion based on their adjusted income or gross income. The HOPWA TBRA program subsidy payment is the difference between the contract rent charged for an approved unit and the tenant rent payment.

There are three key elements for the determination of the HOPWA TBRA assistance:

- Calculation of gross and adjusted household income;
- Calculation of tenant rent payment (based on income); and
- Calculation of HOPWA subsidy payment.

(See TBRA rent calculation for further guidance on rent and utility cost calculations).³

HOPWA participant rent payments will be the higher of two amounts:

- 10 percent of gross household income;
- 30 percent of adjusted income

Please note that all units must comply with Housing Quality Standards (HQS), occupancy standards and rent standards.

Project sponsors may enter into annual renewable contracts with clients. Project sponsors will be required to assure that all property and occupancy standards continue to be met through the entire contract period. Project sponsors must reexamine participant's family income, size and composition at least once a year.

Program Participant files must contain the following documentation:

- Properly calculated household income;
- Properly calculated program participant rent payment;
- The HOPWA subsidy was properly calculated, including use of utility allowances (when applicable) and FMR rent standards;
- Housing meets Housing Quality Standards (HQS) and Lead standards;
- Housing assessment and plan (completed at least annually);
- Documentation of HIV/AIDS status; and
- Copy of legal lease.

Files should contain third-party income documentation, such as pay stubs, earning statements, checks, W-2 forms, and income tax returns. If a participant reports no income, a signed and witnessed "Verification of No Income" statement must be present in the participant's file.

(See <http://www.hudhre.info/index.cfm?do=viewHopwaPrgmAdminToolkit#stnd> for further information and form).

In addition, participant files should contain proper documentation to support any use of the Earned Income Disregard. The Earned Income Disregard, as it is commonly called, allows qualified individuals and families receiving housing assistance to keep more of their earned income for a period of up to two years following an increase in employment income. This resource provides guidance on implementing the Earned Income Disregard for the purpose of calculating client income and resident rent payment (See

³ HUD HOPWA Oversight and Monitoring Guide, Chapter 4, Tenant Based Rental Assistance:
http://www.hudhre.info/documents/HOPWA_Oversight_Guide.pdf

<http://www.hudhre.info/index.cfm?do=viewHopwaPrgmAdminToolkit#stnd> for further information and form).

Participant eligibility status, household composition, and rental payments should be verified at least annually. This is called “re-certification”. The project sponsor should have a method in place for tracking participant eligibility and verifying income that looks for changes in income, family composition, and circumstances. The project sponsor must have policies and procedures in place that require the participant to notify the sponsor of income changes during the course of a program year.

- All payments must be made to a third party, not directly to a program participant.

Short-term Rent, Mortgage, and Utility (STRMU) Assistance is time-limited housing assistance designed to prevent homelessness and increase housing stability for clients with an emergency need. Used in connection with other HOPWA activities and other local, state and federal resources, STRMU can lead to long-term solutions to housing problems for participants receiving this time-limited housing assistance.

Project sponsors may provide assistance for a period of up to 21 weeks in any 52-week program year period (July 1, 2010-July 30th, 2011). The amount of assistance varies per client depending on funds available, tenant need, and program guidelines. STRMU is intended for clients with an emergency need and not intended to provide regular monthly relief to households in situations that are not financially manageable under normal circumstances. If a household is living in a unit that is not normally affordable for them, then access to long-term rental assistance (HOPWA or other) would be a better solution than STRMU assistance.

Example of “Emergency Need”

- Applicant experiences a sudden loss of income due to changes in health
- Applicant has lost employment and has not yet been found eligible for SSDI
- Applicant’s household loses a source of income when family composition changes
- Due to above, applicant family faces eviction, foreclosure, or utilities shut-off
- Applicant faces extraordinary and unexpected health care costs

STRMU is designed to be a short-term, needs-based intervention to prevent homelessness. As such, individuals must meet the following additional criteria in order to receive STRMU assistance:

- Program participant must be currently housed. Homeless individuals are not eligible for STRMU assistance. Assistance is provided to help homeowners and renters remain in their current place of residence.
- Program participant must be able to document that he/she has a legal right to occupy premises or has responsibility for the utility payment. Examples of acceptable documentation are as follows:
 - *Rental payments:* Program participant must be named tenant under valid lease or referenced in lease as occupant of the premises.

- *Mortgage payments:* Program participant must demonstrate that he/she is owner of mortgaged property (mortgage, deed of trust, title insurance policy).
- *Utility payments:* Program participant must have account in their name or proof of responsibility to make utility payments (copies of money orders, cancelled checks, receipts).
- Client must demonstrate he/she does not have the resources to meet rent, mortgage, or utility payments and, in the absence of STRMU assistance, would be at risk of homelessness.
 - Documentation of a default or late payment notice is not required; client can provide copies of bank statements and bills to demonstrate need.

Eligible STRMU Expenses

- Rent and mortgage assistance
 - Must be reasonable and represent actual housing costs
 - The amount of assistance provided is not limited to Fair Market Rents or “reasonable rent” limits
 - Unlike other forms of HOPWA assistance, tenants are not required to pay 30 percent of their income towards the rent or mortgage payment. However, if they are able, program participants should pay a portion of their housing costs as any portion paid by the tenant does not count against the 21-week STRMU benefit ceiling. If project sponsors decide upon this method, they must ensure that this is documented clearly in order for it to be tracked appropriately.
- Late fees
 - Late fees and other penalties may be paid if, in the event of nonpayment, the household is at risk of eviction or loss of housing.
 - Utility assistance
- Utility payments
- All payments must be third party, not directly to program participant.

Note: Project sponsors may establish caps (limits) for rent, mortgage, or utility assistance.

Ineligible Expenses

- Security deposits and first month’s rent
 - STRMU assistance is designed to help homeowners and renters stay in their current place of residence; as a result, security deposits and first month’s rent are not eligible costs under STRMU. However, these costs are eligible as permanent housing placement costs (under the supportive services activity).
- Moving assistance
- Household supplies and furnishings
- Automobile expenses
- Telephone expenses

Program Participant files must contain documentation that verifies:

- AIDS/HIV status;
- Properly calculated household income;
- Need for STRMU assistance;.
- Time limits are consistent with 21 weeks of assistance in a 52 week program year (July 1, 2010-July 30th, 2011);
- Housing meets lead-based paint requirements;
- Housing assessment and plan update at least annually; and
- Valid lease.

Supportive services for HOPWA housing assistance clients and other eligible non-housing assistance clients are eligible expenses. Supportive services are important tools in helping program participants to stabilize their living situations and help address care needs of persons living with HIV infection.

In general, the emphasis of HOPWA programs should be on housing assistance rather than supportive services. No more than 35 percent of the total grant may be utilized for supportive services (*Note: Permanent housing placement costs are included in the 35 percent cap*). Services provided with HOPWA funds should focus on supporting the housing stability of program participants. All supportive service expenses for this HOPWA program must be documented as being last resort – that is, all other resources for supportive services must be exhausted prior to using HOPWA funds for supportive services.

The following are eligible expenses under HOPWA Supportive Services and need to be reported in HOPWA year end performance reports:

- Adult day care and personal assistance
- Alcohol and drug abuse services
- Case management/advocacy/coordination of benefits
- Child care
- Education
- Employment assistance and training for persons with HIV/AIDS
- Health and medical services (with restrictions listed below)
- Legal services
- Life skills management
- Nutritional services (including meals)
- Mental health services
- Outreach
- Transportation

Note: Permanent housing placement (see below) is also designated as supportive services in the reporting forms, but as separate budget line items and tracked separately as a data element.

Required documentation includes:

- Documentation of HIV status
- Properly calculated household income
- Documentation of need for supportive service assistance.
- Housing assessment and plan

However, despite this flexibility of services, HUD has limitations on what is considered to be eligible services. Project sponsors will need to adequately track supportive service activities, document related expenditures, and adhere to these limitations. In general, HOPWA-funded supportive services can be provided to income-eligible persons with HIV and AIDS and their family members. However, as noted in the HOPWA regulations, health services may only be provided to “individuals with acquired immunodeficiency syndrome or related diseases and not to family members” (24 CFR 574.300b(7)).

Any supportive service, including health services, should be provided as a last resort. The sponsor should document reasonable efforts to qualify recipients for other programs that might pay for supportive services in the client’s Individual Housing Service Plans that demonstrate project sponsors are conducting required on-going assessments of the housing assistance and supportive services.

The flexibility built into the range of eligible HOPWA supportive services under this activity can be a challenge given the limited amount of HOPWA available to support these services. This flexibility helps project sponsors adapt their projects to local needs and gaps in services, but the project sponsor needs to understand the limits of this flexibility. While HOPWA acknowledges the importance of combining housing assistance with other supports, HOPWA funds can only be used for eligible activities related to housing needs. The sponsor needs to clarify the nature and scope of the supportive services that will be offered as part of the housing stabilization plan through their HOPWA project.

The following items should be tracked and documented in program participant files:

- Recipients of supportive services are eligible, as defined by HOPWA regulations;
- The activity itself is an eligible HOPWA activity;
- The services are adequate and appropriate for the level of support required by participants;
- The activities conform with the sponsor’s grant agreement, such as limits on health care; and
- Records of supportive services back up the beneficiary data and expenditures reported to the grantee.

In addition, project sponsors must report at the end of the year the following:

- The number of eligible households received the specific service;
- The amount the sponsor spent on the specific category; and
- The value of other non-HOPWA funds brought into the project (leveraged) for this activity.

Permanent housing placement is a subset of supportive services, but is also tracked separately from supportive services (*Note: Permanent housing placement costs are*

included in the 35 percent supportive services cap). Permanent housing placement services may be used to help eligible persons establish a new residence where ongoing occupancy is expected to continue. It may be used to compliment other forms of HOPWA housing assistance.

Costs associated with locating housing:

- Housing referral
- Tenant counseling
 - Understanding a residential lease and its obligations
 - Mediation of disputes

Costs associated with placement in housing:

- Application fees and credit check expenses
- First month's rent and security deposit (not to exceed two months rent)
- One-time utility connection fees and processing credit
- All payments must be third party, not directly to program participant

These costs, especially security deposits, are not considered rental assistance and should be billed as a supportive service. Placement costs can not exceed the value of two month's rent in the new unit. Further, such funds should be designated to be returned to the project sponsor's HOPWA program when beneficiaries vacate the new unit. Returned funds should be recorded and tracked as program income and used to further the project sponsor's HOPWA program purposes.

Ineligible permanent housing expenses include but are not limited to:

- Moving costs
- Standard furnishings
- Housekeeping/household supplies

Other Program Requirements

Housing Plans and Assessments assist in ensuring that participants achieve great housing stability by receiving HOPWA assistance. Regulation 24 CFR 574.500(b)(2) states that the grantee will ensure that each project agrees to "conduct an ongoing assessment of the housing assistance and supportive services required by the participants in the program." The housing assessment process includes gathering participant information about current finances, past rental history, behavioral history, and other service needs. The housing assessment is the foundation for the development of individualized housing and service plans. The sponsor should assess housing and supportive service needs at the point of intake or application and create plans for housing stability. The sponsor should update these plans at least annually.

All program participant files must contain an individualized housing assessment and housing and service plan with evidence of annual updates and ongoing progress.

Examples of Housing Assessments and Client Housing Plans may be found at:
<http://www.hudhre.info/index.cfm?do=viewHopwaPrgmAdminToolkit#checklist>

Housing Quality Standards (HQS) inspections are required for each unit subsidized (TBRA or permanent housing placement) with HOPWA assistance (except STRMU). Each unit must pass a housing quality inspection to ensure the housing is safe and sanitary and in compliance with local and state housing codes, licensing standards, and any other jurisdictional requirements, and the HOPWA program habitability standards as outlined in 24 CFR 574.310(b) (see HOPWA Habitability checklist attached to application). Housing quality inspections are made at initial move-in and annually during the term of the rental assistance. Prior to occupancy by the HOPWA-funded tenant, the unit must be inspected and approved by the project sponsor. The staff member performing the inspection needs not any special training, just familiarity with the HOPWA guidelines. The sponsor should use the HOPWA Habitability form that covers the standards set out in the HOPWA regulations.

- Units must be decent, safe, and sanitary
- These standards apply to any housing through tenant-based rental assistance (TBRA). *Note: does not apply to STRMU*

Lead-Based Paint Requirements

The Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801 et seq.), as amended by the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851 et seq.) and implementing regulations at 24 CFR part 35, subparts A, B, M, and R shall apply to housing occupied by families receiving assistance through HOPWA (see *Lead Inspection checklist that is attached to HOPWA application*).

- HUD's lead-based paint rules apply to all housing assisted through TBRA or STRMU.
- Specifically, lead-based paint rules apply when:
 1. Housing to be assisted was constructed before 1978; and
 2. Residents will include a pregnant woman or a child 6 years of age or younger.*Note: Studio units are exempt.*

- All housing meeting the above criteria must receive a lead-based paint visual assessment before assistance may be provided.
- Staff must complete an online training course before performing assessments. This training can be found at:
<http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm>

Organization Policies and Procedures⁴

Confidentiality Policy

The HOPWA regulation that implements this requirement, 24 CFR 745.440, states: All "project sponsors shall agree to ensure the confidentiality of the name of any individual assisted under this part and any other information regarding individuals receiving assistance."

⁴ See Chapter 3: Basic Oversight Elements in HUD HOPWA Grantee Oversight Manual for further guidance:
http://www.hudhre.info/documents/HOPWA_Oversight_Guide.pdf

The sponsor's confidentiality policy should, at a minimum, address:

- How staff will gather, record, and store confidential information;
- The consent process for the release of confidential information;
- Protocols for responding to breaches of confidentiality;
- Standards contained in relevant state and federal laws, including HIPAA compliance (if applicable) and HIV confidentiality statutes; and,
- Privacy standards related to data collection and use of participant information for program reporting, such as HMIS.

It is also important that the organization not use any identifying information that could compromise a participant's confidentiality regarding the HOPWA program. For example, checks to property owners, envelopes, letterhead, and other printed material should not contain any language that might indirectly disclose a participant's HIV status.

Participant Termination Policy

As described in 24 CFR 574.310(e), HOPWA regulations require agencies to create a formal process for handling the termination of participants from HOPWA assistance. This includes policies for handling surviving family members, in the event of a death of a HOPWA-eligible person.

Termination Procedures should include the following elements:

- Written notice to the participant containing a clear statement of the reasons for termination
- Opportunity for a participant to a review of the decision, allowing the participant to confront opposing witnesses, present written objection, and be represented by individual counsel or representation, before a person other than the person (or a subordinate of that person), who made or approved the termination decision; and
- Provide prompt written notification of the final decision to the participant.

Conflict of Interest

According to 24 CFR 574.625, organizations should have policies in place that identify and handle potential conflicts of interest on the part of board members, staff persons, and other representatives of the organization, such as volunteers. Conflict of interest policies are often part of an organization's "code of conduct" for board, staff, and volunteers. HUD regulations require that sponsors and grantees have adequate codes governing conflict of interest in place.

Faith-based Organizations

A primarily religious organization must provide all eligible HOPWA activities in a manner free from religious influence and in accordance with principles outlined in 24 CFR 574.300(c).

Fair Housing and Equal Opportunity

- HOPWA project sponsors and their activities must comply with all federal laws, executive orders, and regulations pertaining to fair housing and equal opportunity, and must take measures to ensure non-discriminatory treatment, outreach, and access to program resources (see pg. 70 of the HOPWA Oversight

Guide for specifics on how this relates to the HOPWA program:
http://www.hudhre.info/documents/HOPWA_Oversight_Guide.pdf).

DUNS Number

All sub-grantees are required to register with Dun and Bradstreet to obtain a DUNS number, if they have not already done so. For more information see 73 FR23483, April 30, 2008 or go to: http://www.dnb.com/US/duns_update/

Central Contractor Registration (CCR)

The Central Contractor Registration (CCR) is the primary registrant database for the U.S. Federal Government. CCR collects, validates, stores, and disseminates data in support of agency acquisition missions, including Federal agency contract and assistance awards. Both current and potential federal government registrants are required to register in CCR in order to be awarded contracts by the federal government. Registrants must update or renew their registration at least once per year to maintain an active status. Although recipients of direct federal contracts and grant awards have been required to be registered with CCR since 2003, this requirement is now being extended to indirect recipients of federal funds with the passage of ARRA. Per ARRA (American Recovery and Reinvestment Act) and FFATA (Federal Funding Accountability and Transparency Act) federal regulations, all sub-grantees or subcontractors receiving federal grant awards or contracts must be registered with the CCR. To register go to <https://www.bpn.gov/ccr/default.aspx>

Method of Payment

Disbursements will be made either on a monthly or quarterly basis through Requests for Reimbursement.

DHCD requires that project sponsors receive funds via electronic transfer. To establish an account go to the Virginia Department of Accounts web site (<http://www.doa.virginia.gov>) and select EDI (Electronic Data Interchange) from the links on the right hand side of the page. The EDI guide then may be accessed through a link under the Trading Partner Information section.

Record Retention

Each sponsor must maintain all HOPWA-related program and financial records for a five-year period, in order to document compliance with the provisions of HOPWA regulations.

Reporting

Project sponsors are required to collect and report all necessary HOPWA data elements on the HOPWA year-end report which is due by July 30th, 2011.

In addition, project sponsors must submit the HOPWA Quarterly Progress Review (QPR) in accordance with the schedule listed below:

Reporting Period	Due Date
July 1-Sept. 30, 2010	Oct. 10, 2010
Oct. 1-Dec. 31, 2010	Jan. 10, 2011
Jan. 1-Mar. 31, 2011	April. 10, 2011
April 1-June 30, 2011	July 10, 2011

Monitoring

DHCD reserves the right to conduct monitoring visits with project sponsors. Visits may be scheduled as a matter of routine or based on project sponsor performance, fiscal reporting, program reporting or other areas of concern.

Monitoring guide - This resource discusses in more detail HOPWA requirements, eligibility, and monitoring requirements. It also has some useful tools and forms that may assist in running your HOPWA program. Please note: Not all activities described in guide are part of the DHCD HOPWA program.

- http://www.hudhre.info/documents/HOPWA_Oversight_Guide.pdf

Other guidance:

For further guidance please visit the following link:

HOPWA Program Administration Toolkit -The resources located here are designed to help project sponsors that receive HOPWA funding comply with applicable laws and regulations and administer programs more efficiently and effectively. Some of the forms that may be useful are HOPWA Habitability Standards checklist, STRMU Tracking sheet, Housing application and Assessment, Client Files checklist, etc. *Please note that all forms may not be applicable to the DHCD HOPWA program and use of the specific tools is not required.*

- <http://www.hudhre.info/index.cfm?do=viewHopwaPrgmAdminToolkit#checklist>

Proposal Evaluation Criteria

All proposals received by the deadline (5 P.M. on Friday, April 9, 2010) that meet minimum threshold requirements will be reviewed and ranked by a proposal review panel.

Threshold Criteria:

- Proposal meets all pre-screening threshold criteria
 - Eligible applicant
 - Eligible activities
- Proposal received on or before deadline
- Budget within costs category limits

All proposals meeting the minimum threshold requirements will be reviewed, scored as is, and ranked through a panel review process based on the following criteria:

- Need (maximum 50 points)
 - Does the proposal seek to fill what would otherwise be a gap in HOPWA services for this specific geographic area?
 - Does the proposal (proposed budget and budget narrative) demonstrate a need for the requested funding?
 - Is there clearly a demand for the HOPWA services in the area?
 - How critical is the need in the area?
 - Does the proposed program include any special features that would enhance the proposal's ability to meet the target population's needs?
 - How credible is the evidence to support the local need?
 - What is the specific target population?
- Approach (maximum 25 points)
 - How experienced is the applicant with providing similar services and assistance?
 - How experienced is the applicant in working with the target population?
 - How well is the proposal coordinated with other activities and funding sources in the area?
 - Does the proposed program appear to be based on proven methods and/or is the program able to demonstrate good outcomes?
 - Do the program costs appear reasonable?
 - Do the program outcomes and objectives appear reasonable?
- Capacity (maximum 25 points)
 - How experienced is the applicant with providing similar services and assistance?
 - Does there appear to be a plan for appropriate program oversight?
 - Does the applicant demonstrate effective grant management experience?
 - Does the applicant demonstrate adequate capacity for data collection and reporting?

- How many, and what type of findings, concerns, or other compliance issues has the agency had during the 2009-10 program year?
- To what degree does the program leverage other resources?

Proposals must score threshold criteria to be eligible to receive funding through this program. Actual awards are based on request, prior performance, available funding, and scores.

Application Instructions

General Directions

Applicants should reference these accompanying materials for details on applicant eligibility, eligible/ineligible activities, program participant eligibility, and other program requirements.

Submission Requirements

Applications for HOPWA funding must be received at DHCD 5:00 PM on Friday, April 9, 2010. Applications received after the deadline will not be accepted and the applicant will not be considered for funding.

Applications will be reviewed and scored “as is.” Missing and/or incomplete information will negatively impact the overall proposal score.

Applicants must submit **one unbound original and five unbound copies** of the application and all required documents. Applications should be mailed to:

Nicole Poulin, Program Manager
Homeless and Special Needs Housing
Department of Housing and Community Development
Main Street Centre, Suite 300
600 East Main Street
Richmond, Virginia 23219

Hand delivered applications must be received at DHCD by the deadline. Please request a receipt upon delivery.

Hand written applications will not be accepted. Attachments (originals) must have original signatures.

All narratives must be single spaced in 12 point font Arial with one inch margins.

The complete legal name of the applicant organization and the program must appear in the upper right corner of each page.

Applications should be assembled in the order indicated in the application.

All questions regarding the application should be directed to Nicole Poulin at 804-371-7113 or nicole.poulin@dhcd.virginia.gov.

DHCD is offering a “How to Apply” conference call for prospective sub-grantees. The conference call will review program parameters and application requirements. While it is not mandatory, it is highly recommended that all applicants participate in the conference call.

The “How to Apply” conference call will be held:

Thursday, March 11, 2010 10:00 AM to 12:00 Noon

To access the conference call:

Dial 866-842-5779 (toll free)

The access code for this call is:

8043717100

DHCD anticipate announcements of awardees by July 1, 2010.

Any updates related to this funding will be posted on DHCD’s website at www.dhcd.virginia.gov . It is incumbent upon the invested parties to check for updates.



Applicant Name:

Program Name:

1. Is this organization a 501 C 3? (a) ☐ YES ☐ NO ☐ PENDING

Is this organization a unit of local government? (b) ☐ YES ☐ NO

2. Please check all that apply to the applicant:

- (a) ☐ Current on 990 filing
- (b) ☐ No findings on most recent agency financial audit
- (c) ☐ No unresolved IRS findings
- (d) ☐ No outstanding DHCD findings

3. Applicant – Prior year information

Applicant Prior Year Information (2008-09)	
(a) Prior year total <u>agency budget</u> *	\$
(b) Prior total dollar amount of <u>program budget</u>	\$

**Total agency/organizational budget (not program budget). For units of local government only specify appropriate division or department budget. For national non-profits please specify only the local chapter.*

Applicant Legal Name:

Applicant Mailing Address:

DUNS Number:

CCR Number:

Primary Contact Person Name:

Contact Person Position Held:

Telephone Number: (area code)

Email:

Program location (address):

Program location (county/city):

Please tell us what areas this proposed program will target for HOPWA services:

Primary Service Areas (city/county)

**Add additional rows as needed.*

HOPWA Request

Please provide the funding request in the following table. Note the request is for a *one-year term* and must stay within the program parameters and limitations as specified in the HOPWA Guidelines.

Activities	Total HOPWA Request	Other Funding	Amount
Tenant-based Rental Assistance (TBRA)*	\$ -	\$ -	\$ -
Short-term Rental, Mortgage, Utility (STRMU)*	\$ -	\$ -	\$ -
Supportive Services**	\$ -	\$ -	\$ -
Housing Placement Services**	\$ -	\$ -	\$ -
Administrative***	\$ -	\$ -	\$ -
Total Request	\$ -	\$ -	\$ -

*TBRA and STRMU combined must be at least 65 percent of total HOPWA request.

**Supportive Services and Housing Placement Services combine can be no greater than 35 percent of total HOPWA request.

*** Administration costs cannot exceed 7 percent of total HOPWA request.

Target Population

Please describe the program target population.

Numbers Served

In the chart below please provide the program projected numbers (households) served for 2009-2010 and 2010-2011 and the actual numbers served in 2008-09.

	TBRA	STRMU	Supportive Services	Housing Placement Services
Projected Households Served (2010-2011)	0	0	0	0
Anticipated Households Served (2009-2010)	0	0	0	0
Actual Households Served (2008-09)	0	0	0	0

Please explain any significant differences from year to year:

Need Narrative

Please describe what local needs and service gaps this program seeks to fill or currently fills. Be sure to note any supporting evidence for this need. This should be specific to the proposed service area.

Program Description

Please describe the proposed program. Be sure to include details on the following:

- Target population
- Outreach methods
- Details of the types of assistance and services that will be provided to the individuals/households in the program
- Details on the length program
- How service will be coordinated with other programs (including mainstream services)
- Program outcomes (current and/or projected)

Collaboration

Please describe the key collaborations (current and/or proposed) specific to this program.

Organizational Capacity

Please describe your agency's capacity to provide HOPWA services.

Approval of Authorized Official (For the Applicant)

Signature

Title

Name (Printed or Typed)

Date

Required Documentation	
<i>Type</i>	<i>Attached</i>
Documentation of Non-Profit Status	<input type="checkbox"/>
Relevant M.O.U.s/Written Agreements/Service Contracts (specific to this program)	<input type="checkbox"/>
List of Board of Directors and contact info	<input type="checkbox"/>
Agency Budget (current year – must include all programs and funding sources)*	<input type="checkbox"/>
Detailed Program Budget (including expenses and revenue) current year (2009-10) and proposed (2010-11)	<input type="checkbox"/>
Continuum of Care Participation Certification	<input type="checkbox"/>
Ryan White Consortium Participation Certification	<input type="checkbox"/>
Certifications and Assurances	<input type="checkbox"/>
Most Recent Audit**	<input type="checkbox"/>

**Units of government should provide department or agency budget.*

***Not applicable if DHCD already has a copy of the applicant's most recent audit. If you have any questions regarding your audit, please contact Tonya Thomas by email at tonya.thomas@dhcd.virginia.gov or by phone at (804) 371-7116.*

To be completed by the Continuum of Care Chairperson. Note: Form must be completed for each CoC in the service area for which application is being made.

ACTIVE PARTICIPATION IN LOCAL CONTINUUM OF CARE

Applicant Information:

Name:

Address:

Continuum of Care Group:

My signature below attests that this agency/organization:

Is an active participant of the above named Continuum of Care:

☐ Yes

☐ No

2. **Is filling a gap by providing services to eligible individuals and their families or the lack of this established program would cause hardship in our community's continuum of services:**

☐ Yes

☐ No

If no, please provide an explanation:

Signature of Continuum of Care Chairperson*

Date

Printed Name and Title

Agency

*** If the Chairperson of the applicant's Continuum of Care is an employee, volunteer or board member of the applicant organization, another Continuum of Care member in a leadership position must certify this assurance.**

To be completed by the Ryan White Consortium Chairperson. Note: A form must be completed for each consortium in the service area for which application is being made.

ACTIVE PARTICIPATION IN LOCAL RYAN WHITE CONSORTIUM

Applicant Information:

Name:

Address:

Ryan White Consortium:

My signature below attests that this agency/organization:

1. **Is an active participant, of the above named Ryan White Consortium**
☐ Yes ☐ No
2. **Is filling a gap, due to the lack of established programs that would decrease the hardships for the eligible targeted population, in our community's continuum of services by providing housing and support services through their programs**
☐ Yes ☐ No

If no, please provide an explanation:

Signature of Ryan White Consortium Chairperson*

Date

Printed Name and Title

Agency

*** If the Chairperson of the applicant's Ryan White Consortium is an employee, volunteer or board member of the applicant organization, another Ryan White Consortium member in a leadership position must certify this assurance.**

CERTIFICATIONS AND ASSURANCES

I, _____ (*enter name*), authorized representative of _____ (*enter name of organization*) on behalf of the organization do hereby certify that, if an award is received, the organization will conform to all programmatic regulations, guidelines and requirements set forth in the 2010-11 Application, Program Guidelines, and HUD Policies while conducting grant activities for the programs funded.

To this end, I certify/assure the following:

1. All services/programs supported by grant funds will be delivered on a non-discriminatory basis consistent with the Fair Housing Act of 1988 and the Virginia Fair Housing Law;
2. The organization will provide all activities under the program(s) in a manner that is free from religious influence;
3. The organization does not require a fee or donation as a condition for receiving services;
4. The organization provides housing assistance that is compliant with applicable State and local health, building, and fire safety codes, meeting the U. S. Department of Housing and Urban Development's Housing Quality standards and Habitability Standards as a minimum, or agrees to help make necessary improvements/repairs for code compliance;
5. The organization shall maintain and operate under a standardized set of procurement procedures designed to assure efficient and proper expenditure of grant funds;
6. The organization will administer a policy to ensure a workplace free from the illegal use, possession or distribution of drugs or alcohol by its employees and/or beneficiaries;
7. The organization will maintain and operate under a standardized conflict of interest procedure for employees and members of the board;
8. The organization will insure the confidentiality of its clients and client records;
9. The organization assures that housing assistance will only be provided to client within Virginia's non-eligible metropolitan statistical areas;
10. The organization assures that it will not provide HOPWA assistance to any client already receiving assistance from another HOPWA grant or not otherwise eligible individuals;
11. The organization (project sponsors) agrees to assure availability of appropriate services as required by Sec. 574.310(a) to eligible persons assisted with HOPWA housing assistance;
12. The organization (unless a unit of local government) was incorporated under Virginia law on _____; and
13. The organization (unless a unit of local government) has received Federal tax-exempt status under Section 501 (c) of the U. S. Internal Revenue Code.

Signature of Authorized Representative

Date

Title of Authorized Representative (*print or type*)

HOPWA Basic Habitability Checklist

Unit or Facility Address
(include street address, city and zip code)

Landlord/ Property-owner Contact Information
(include name, company name, mailing address and phone number)

	YES	NO
<u>State and local codes.</u> Unit is compliant with all applicable state and local housing codes, licensing requirements, and any other requirements in the jurisdiction regarding the condition of the structure and the operation of the housing or services.		
<u>Structure and materials.</u> The unit is structurally sound so as not to pose any threat to the health and safety of the occupants and so as to protect the residents from the elements.		
<u>Access.</u> The unit is accessible and capable of being utilized without unauthorized use of other private properties. The unit has alternate means of egress in case of fire.		
<u>Space and security.</u> Each resident is afforded adequate space and security for themselves and their belongings. Each resident must be provided an acceptable place to sleep.		
<u>Interior air quality.</u> Every room or space has natural or mechanical ventilation. Unit is free of pollutants in the air at levels that threaten the health of residents.		
<u>Water supply.</u> The water supply is free from contamination.		
<u>Sanitary facilities.</u> Residents have access to sufficient sanitary facilities that are in proper operating condition, may be used in privacy, and are adequate for personal cleanliness and the disposal of human waste.		
<u>Thermal environment.</u> The unit has adequate heating and/or cooling facilities in proper operating condition.		
<u>Illumination and electricity.</u> The unit has adequate natural or artificial illumination to permit normal indoor activities and to support the health and safety of residents. There are sufficient electrical sources to permit the use of essential electrical appliances while assuring safety from fire.		
<u>Food preparation and refuse disposal.</u> All food preparation areas contain suitable space and equipment to store, prepare, and serve food in a sanitary manner.		
<u>Sanitary condition.</u> The unit and any equipment are maintained in sanitary condition.		
<u>Fire safety.</u> Each unit includes at least one battery-operated or hard-wired smoke detector, in proper working condition, on each occupied level of the unit. Smoke detectors are located, to the extent practicable, in a hallway adjacent to a bedroom. If the unit is occupied by hearing impaired persons, smoke detectors have an alarm system designed for hearing-impaired persons in each bedroom occupied by a hearing-impaired person.		
<u>Fire safety.</u> The public areas of all units must be equipped with a sufficient number, but not less than one for each area, of battery-operated or hard-wired smoke detectors. Public areas include, but are not limited to, laundry rooms, community rooms, day care centers, hallways, stairwells, and other common areas.		

Agency Name

Agency Staff Name

Signature

Date

Program Participant Name (if applicable)

Date

Signature

Landlord/ Property-Owner Name

Date

Signature

Lead-Based Paint Visual Assessment

All units in which ESG program participants reside are subject to Lead-Based Paint requirements (not applicable to emergency shelter programs with stays less than 100 days). This form must be completed and included in each program participant file. Individuals completing this form must complete the online HUD <http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm> training.

Program Participant Name: _____

Property Address: _____

Property Owner Name: _____

Check all that apply:

- ☐ Property was built after 1978 Year Property Built: _____
- ☐ No child under 6 lives with program participant
- ☐ Property is zero bedrooms, SRO housing, elderly housing
- ☐ Property has been tested and determined to not to contain lead-based paint (attach documentation)
- ☐ Property has had lead-based paint hazards removed (attach documentation)

☐ If any items are checked above, no visual assessment is required. Please include appropriate signatures (agency and program participant) and dated.

☐ No items are checked above (Visual Assessment required)

Interior: Is there any peeling, chipping, chalking, or cracking paint?

☐ YES ☐ NO

Interior: Deterioration exceeds the de minimis level?

☐ YES ☐ NO ☐ NA

Exterior: Is there any peeling, chipping, chalking, or cracking paint?

☐ YES ☐ NO

Exterior: Deterioration exceeds the de minimis level?

☐ YES ☐ NO ☐ NA

Common Areas: Is there any peeling, chipping, chalking, or cracking paint?

☐ YES ☐ NO ☐ NA

Common Areas: Deterioration exceeds the de minimis level?

☐ YES ☐ NO ☐ NA

Describe Any Action Taken:	
Program Participant: _____	
_____ Signature	_____ Date
Property Owner Name: _____	
_____ Signature	_____ Date
Program Staff Name: _____	
_____ Signature	_____ Date